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CONFIRMATION NO. 5812

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| RULE | | | | | | |
| APPLICANTS Hiteshkumar Doshi, Mumbai, INDIA; Parizad Elchidana, Mumbai, INDIA; Sunil Jog, Mumbai, INDIA; Deepak Sonaje, Mumbai, INDIA; | | | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/US05/00500 01/08/2005 | | | | | | |
| ** FOREIGN APPLICATIONS ***** UNITED KINGDOM 0400452.9 01/09/2004 | | | | | | |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/22/2007 | | | | | | |
| Foreign Priority claimed | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Initials | INDIA | 2 | 38 | 5 |
| Verified and Acknowledged | /JESSICA M KASSA/ Examiner's Signature | | | | | |
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| TITLE | | | | | | |
| Compression Coated Tablet Comprising Sumatriptan | | | | | | |
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |
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